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Citation for final published version:

Roberts, Louise ORCID: <https://orcid.org/0000-0002-6154-3549> 2017. A small-scale qualitative scoping study into the experiences of looked after children and care leavers who are parents in Wales. *Child & Family Social Work* 22 (3) , pp. 1274-1282. 10.1111/cfs.12344 file

Publishers page: <http://dx.doi.org/10.1111/cfs.12344>
<<http://dx.doi.org/10.1111/cfs.12344>>

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A small scale qualitative scoping study into the experiences of looked after children and care leavers who are parents in Wales

Abstract

This paper presents the findings of a scoping study into looked after children and care leavers who are parents in Wales. Eight parents engaged in a qualitative interview. Thirty one pregnancies were discussed during the interviews; sixteen live births, two on-going pregnancies, one still-birth, one termination and eleven miscarriages. At the point of interview, two parents continued to care for their children but six had experienced the permanent removal of their child/ren as a result of social services intervention. Twelve of the sixteen children discussed in the interviews were 'looked after' or adopted.

Despite its small scale nature, the study highlights important considerations before, during and after participants became parents. Broadly categorised these relate to the influence of parents' childhood experiences on their capacity to be parents, the availability and adequacy of support during parenting and the ensuing impact of parenting 'success' or 'failure'. For parents who had experienced the loss of a child, some were resigned to having no further children, some continued to hope for a family in the future, while others had experienced cycles of repeated pregnancies and compulsory removals. The findings are considered in the context of related literature and suggest that increased attention is required in this under-researched but highly emotive area.

Introduction

It is widely recognised that young people who have experienced the care system are more likely than the general population to become parents at a young age. Although prevalence studies are often based on non-representative samples of varying size, studies in both the United Kingdom (UK) and elsewhere have consistently shown sizable proportions of this population experience early pregnancy and parenthood. Examples include Biehal and Wade's (1996) survey related to 183 care leavers (aged 16-18) in England, in which almost 25% of the young women were pregnant or parenting at the point of leaving care. A sub-sample of Biehal's participants (n=74) were followed for a further 18-24 months, by the end of which almost half of the young women, or a third of the total sample, were parents. Similarly, the Midwest Study, a longitudinal study of 700 young people in three North American states (Illinois, Iowa, and Wisconsin), found that by age 21, 71% of the care-experienced young women reported having been pregnant and 50%

of men reported being fathers (Courtney et al. 2007). In Wales, the actual numbers of pregnant or parenting looked after children and care leavers is unknown. However an audit of teenage pregnancies over a one year period found that the proportion of pregnancies for looked after children were significantly higher than for non-looked after children; 5.8% of the total population of looked after children population presented as pregnant within this period, compared with 0.8% of the general population (Craine et al. 2014). The authors also found that care-experienced young people were more likely than their non-looked after peers to continue the pregnancy to live birth (Craine et al. 2014).

Early parenthood can be viewed as a positive choice for young people who have been cared for by the State, in terms of providing stability, purpose and love (Haydon 2003). However relatively little is known about the experiences or outcomes for families where one or both parents became pregnant as a looked after child or care leaver. In his review of the evidence base, Mendes (2009) noted that studies were often based on small samples and offered contradictory findings. Motherhood has the potential to be a positive and repairing experience for care experienced women (Maxwell, Proctor and Hammond 2011), providing “a sense of purpose and direction in otherwise chaotic lives” (Barn and Mantovani 2007: 239). Despite adversity, studies have shown some parents cope well with their children and reflect positively on the influence of parenthood on their lives (Wade 2008, Chase et al. 2009). However, organisations such as Voice (2009) have raised concerns that looked after children and care leavers who are parents are at increased risk of social services intervention and inadequately supported by statutory services. Research has found that care-experienced parents can be reluctant to seek support, fearing unhelpful interference and monitoring by social workers (Corylon and Maguire 1999). A ‘presumed incompetency’ (Mantovani and Thomas 2014), mistrust of social workers and increased monitoring and scrutiny (Chase et al. 2009) have also been noted. Similarly, The Midwest Study reported mothers who had previously been in State care were six times more likely than their peers to report living apart from at least one biological child by age 25/26 (Courtney et al. 2011). Likewise, Dworsky (2015) concluded from an examination of social work data in Illinois, in relation to 2487 children born to young people in foster care, that parents who gave birth whilst in the care of the State, were more likely than other adolescent parents to experience child welfare involvement.

Little evidence exists in relation to care-experienced parents in Wales. With the exception of Craine et al. (2014) none of the above studies were conducted with Welsh populations and the applicability of the findings is unknown. There are no official statistics detailing the numbers

of looked after children and care leavers who experience pregnancy and parenthood as a looked after child (aged up to 18) and / or as a care leaver whilst still eligible for statutory support (aged up to 21 or 25 if in further education or training). Neither is it known how many of these families are in receipt of State support / intervention or the outcomes for families in terms of whether parents succeed in sustaining care of their children. Such evidence may be particularly important considering the proportionately higher rates of looked after children in Wales in comparison with England (CoramBAAF 2015).

A post-doctoral fellowship project has been funded by Health and Care Research Wales with the aim of investigating the experiences and family outcomes of families where one or both parents is a looked after child or care leaver. The study is specifically concerned with individuals who became parents as looked after children or care leavers up to the age of 25. The research plan over the coming years is outlined in Figure 1.

INSERT FIGURE 1 ABOUT HERE

The focus of this paper relates to the initial scoping interviews conducted with former looked after children. The interviews were designed to provide insight into the experiences of families in Wales and act as a foundation to inform future parts of the fellowship project. Ethical approval for the scoping study was granted by Cardiff University's Research Ethics Committee. Eight qualitative interviews were conducted with parents (7 mothers, 1 father) over the spring and summer months of 2015. Three additional parents initially agreed to participate in the study but withdrew consent prior to interview. The participants were recruited via two third sector organisations whose support remit spans South and West Wales. Gatekeepers within each organisation had been briefed on the fellowship study and were informed that the author was interested in interviewing a sample of parents to gain insight into their experiences. Criteria for inclusion in the study was experience of the care system and of pregnancy and / or parenting. Both gatekeepers were encouraged to think of all parents that they were in contact with and were not asked to specifically approach parents with positive or negative experiences.

All participants were provided with an information and consent form which outlined the purpose of the scoping study together with details of the fellowship project. Participants were offered flexibility in terms of where they wanted the interviews to take place and whether they wanted anyone else to be present. The qualitative interviews were largely unstructured and began by inviting parents to discuss their experiences of pregnancy and parenting. The interviews ranged from just under an hour to two and a half hours duration and each was

transcribed verbatim. An inductive thematic approach (Seale 2012) to analysis was adopted whereby interview transcripts were coded and collated, enabling key themes within and across participant data to be highlighted. The conduct of interviews and analysis was undertaken by the author.

All participants were from Wales, were White and at the time of interview, were aged between 20 and 32. All had experienced parenthood before the age of 25; five became pregnant after leaving care and living independently, whilst three became pregnant as looked after children (aged under 18). Some recalled relatively recent parenting experiences while others discussed children who were now entering their teenage years. During the interviews, 31 pregnancies were discussed. This related to sixteen live births, two on-going pregnancies, eleven miscarriages, one termination and one still birth. This may not represent a full account of the pregnancies experienced. Parents were not asked to disclose a history of their pregnancy experiences but this information was volunteered during some of the interviews. Only two parents were still living with their children (4 children in total). Six parents had experienced a child / children being removed from their care and twelve of the sixteen children born to the care-experienced parents were 'looked after' or adopted at the point of interview.

Limitations

This scoping study was designed to explore the experiences of pregnancy and parenting for a group of former looked after children in Wales. The small scale nature of the study is recognised and no claims of generalisability are made. In keeping with the small-scale, focussed nature of the study, parents were not asked to disclose specific details about their care histories. Some information was volunteered which included stable, positive relationships with carers as well as unstable and changeable placements in both foster and residential care settings. It is recognised that more nuanced exploration of individuals' care histories and their potential relationship to parenthood experiences would be beneficial in future research.

The potential for selection bias is accepted as all of the participants were engaged with third sectors agencies and all participants were informed that participation was voluntary. Several of the study participants were eager to engage with the research and have the opportunity to communicate their stories. As such the narratives reflected in the research may not reflect the experiences of other parents who may be less motivated to discuss their stories or who are not in contact with similar supportive organisations.

In the interests of ethical safeguarding, participants were reminded that they were under no pressure to disclose information to the researcher and could provide details as they felt comfortable. As such, it is recognised that the narratives may constitute partial reflections and reconstructions of past events.

Findings

The following section presents the key themes emergent from the interviews. Issues raised by participants related to factors before they became parents, the support available to them during parenthood, and the lasting impact of parenting 'success' or 'failure'.

It is important to note that the features of the sample (only two of the parents interviewed retained care of their children) may overly emphasise problems and difficulties. The parents that participated in this study described concerns and challenges that inhibited their ability to parent successfully, and being able to sustain caring for their children, or not, was described as having significant and continuing influence on their current lives. Therefore, whilst it is not suggested that all young parents in or leaving State care will experience these issues, the findings are nevertheless helpful in recognising some of the particular challenges that may affect this population.

In order to protect the anonymity of participants, all names and identifying features have been changed.

- ***Before parenting: the impact of childhood experiences***

During the interviews, parents made repeated references to their childhood experiences. Participants frequently made connections between the past and how prepared or able they felt to be 'successful' parents. Participants discussed this in terms of:

- a) their exposure to positive parenting as children; knowledge which they could draw upon when caring for their own children.
- b) the influence of unresolved personal needs from the past which continued to have a detrimental impact on their lives.

Amy reflected:

I had a lot of worries when I was pregnant because of my childhood, there was a lot of serious things that had gone on in my childhood that had sort of messed with my mind in a way, if you like. ... I didn't feel confident about becoming a mum, because I didn't have no knowledge of being a parent and what a parent was.

Amy's comments that her childhood 'had messed with her mind' alluded to mental health difficulties that she had suffered for many years. This was a recurrent feature within the interviews and incidents of depression, self-harm, suicide attempts, drug and alcohol dependency were discussed by all but one of the participants. Amy's abusive childhood had been devoid of loving relationships and she was concerned that this would inhibit her ability to be a parent:

I'd had the physical skills there, like to cook, to clean, to do school runs and stuff like that, I had all that there but I didn't have the...the emotional knowledge and support there and the confidence in myself to become the sole parent of a baby sort of thing, it was quite a huge thing.

During her childhood Amy had cared for younger siblings and had some knowledge of the practical components of caring for a child. More challenging for her and other participants such as Leanne, was the ability to respond emotionally to a child.

Leanne: When I had him [her son] I didn't really know how to speak to him. I didn't know how to bond. ... They [social services] said I could look after his basic needs but apparently that wasn't good enough.

Leanne's anxieties of bonding with her son are not unique to parents who have been mistreated or cared for by the State. However Leanne's childhood experiences, like Amy's, meant she was unable to draw on personal experiences of nurturing parental relationships. Having not been a recipient of positive parental care, she struggled to know how such care should be given or what it entailed beyond the meeting of a child's basic needs. Like Amy, Leanne had also suffered from mental ill health and she believed her experiences as a child had been inadequately responded to. Leanne believed that her unresolved needs had disadvantaged her as a parent: "I had been asking them [social services] for years for [psychological] help but they didn't do anything".

For Sadie, traumatic experiences in her childhood had been influential in her decision to actively try for a child at 15: "I just thought something that was mine and because I never had the family unit ... I just slept around trying to get caught by anyone." Yet despite craving a family of her own, Sadie's unresolved personal issues inhibited her ability to parent successfully:

Sadie: Parenting assessment I've always been fine with, I've always been able to change them, feed them, bath them. I did need a little bit of teaching with my oldest but they [social services] said I picked it up quite fast, they were fine with the parenting side of it, it was always my lifestyle.

As with Amy and Leanne, Sadie had been able to fulfil the practical aspects of caring for a child. However, her on-going needs manifested in a series of violent relationships, drug and alcohol dependency and self-harm. As such, social workers deemed her unable to parent. Sadie's first born child was removed, as were her four subsequent children. At the time of interview, Sadie was pregnant and stated she was '*fighting them [social services] for number six*'.

- ***During parenting: the availability and adequacy of support***

Support availability was viewed as a key factor in enabling successful parenting. A range of support needs were discussed within the interviews which included access to advice and practical help, through to the provision of more comprehensive services designed to support and / or assess parenting capacity. The following section considers the support parents were able to access from birth families, social workers and family support services.

- ***Support from birth families***

For some parents, the onset of parenthood offered hope of renewed or improved relationships with birth families. Some participants sought support with parenting from birth family members but their hopes and expectations were sometimes not fulfilled. For example, Tara stated: "my sister was meant to have [child's name] every other weekend just to give me a break. But she didn't stick to that". Likewise Tara stated her mother had repeatedly promised to visit her but never had.

In contrast to Tara, other parents believed they could have accessed much needed support from birth families but had been directed by social services to prohibit contact with their children due to historical information or continued concerns. For example James stated:

They [social services] said no matter what happens your parents aren't going to be able to go anywhere near [child's name]. And I felt that quite unfair to be honest because my mum wasn't a problem, it was my father that was the problem, and my mum's ex-partner.

For James and others, imposed conditions set by social services were commonly regarded as unhelpful and / or unjustified. Such restrictions had the potential to compound parents' isolation and some struggled with feeling their loyalties and obligations divided. For example Emma discussed her frustration that her father had not been allowed contact with her child when he had unrestricted access to other children within the family. New rifts had developed within her family as she had attempted to abide by the social worker's demands. Likewise

while Leanne stated that she was not explicitly prohibited from having contact with her birth parents, she was only allowed to have two hours out alone with her baby from the mother and baby placement. This effectively meant that she was unable to access support from her family as the bus journeys were too time consuming.

- ***Relationships with social workers***

Within this study, feelings about social services and parents' relationships with individual social workers were predominantly negative. The reasons for this varied and included associations with the past as well as more recent restrictions on daily life or contact with birth family as described above. Some parents within the study had voluntarily approached social services for support with parenting, while in other instances social workers had responded to concerns for a child's welfare. Yet regardless of how social workers had become involved with parents, there was a perception that their history of State care carried a stigma and inhibited their chances of successful parenting. For example, Amy reflected:

I was scared that it [care history] was a stigma that was in my mind that I was adamant that if you had been in care your child would be taken away from you, they would look at you and think you can't look after that baby and you didn't deserve that baby.

In other instances, parents gave practical examples of how their care histories had influenced their relationships with social workers:

Sarah: Once they [social services] found out I'd been in care that was it, they went back pulled up all the files, read them all seen what had happened ... they read those records some of which had been written ten years previously. They judged me and used it against me.

James: We [James and his partner] were both in care for similar reasons. Violence was a massive part of it, that's what's made them [social workers] a bit nervous, the fact that whether or not we would treat him [son] the same way. I said in court, I said realistically if you look at it from our point of view, we're not going to do that, now we've been through it ourselves, we're going to want to give him a better life compared to what we had.

For both James and Sarah, social workers' access to a wealth of historical information distinguished them from other parents undergoing assessment or accessing support. Such access was experienced as exposing and unfair, with case file records wielding powerful influence, regardless of concerns for accuracy and relevance to current circumstances.

In addition to feeling stigmatised and judged by historical records, parents also accused social workers of failing to offer support and being overly eager to remove children from their care. For example Sarah stated:

I phoned social services, I was crying, I said 'I need help, I need some support, I just feel like killing myself'. That was it, they came out, they said you're incapable this that and the other and they took her and off they went.

Similarly, speaking about her relationship with her social worker, Tara stated:

[We] don't get on. I used to tell her I hate her. ... Basically they [social services] never wanted [child's name] to come back, that's why they left me to it.

Tara's comments suggest she believed social workers wanted her to fail at parenting and were not forthcoming with advice or family support interventions. The potential for parents to feel social workers had a hidden agenda was also apparent in other instances:

James: When the social workers were involved like they were saying to us, they were just here to help you, give some support, just to give you some advice, point me in the right directions. The day he was born, not before, not once, but from the day one they said that they don't think that we would be able to handle [child's name], they don't think we had the right parenting skills to be able to look after him.

Emma: They came and saw me when I was three months pregnant and it was like 'yeah everything is fine, no concerns'. Then the day she is born everybody is in court.

○ ***Services to support families***

Five of the eight parents discussed having accessed some type of family support services outside of working with individual social workers. This included services within the community, accessed without the aid of social workers, as well as those which were facilitated by the State. Family support services discussed ranged from the provision of time-limited support for a few hours a week through to comprehensive residential placements for parents and children.

Amy was referred to a parenting course and reflected positively on its impact:

It gave me a sense of routine, it gave me a sense of empathy towards your own child ...I didn't have the emotional support to become a mum at that time and I think that having the parenting course gave me that, it gave me the emotional support and confidence as well to put everything into that routine.

The parenting course helped Amy overcome her anxieties in being able to successfully parent her child. Her comments suggest that such courses have the potential to provide much needed

information regarding positive parenting skills and practices when parents have had little experience of positive caring relationships. However for other parents, including those who were not offered any support, there was disconnect between the services available and the support needs they perceived themselves as having. In particular, the availability of regular, practical support was often lacking for parents with limited social networks. Both Tara and Sarah discussed the importance of having someone to provide them with breaks from parenting, support that would likely be appreciated by the majority of parents, regardless of age or care history. Sarah stated she had enjoyed attending a mother and baby group but at only two hours a week, it fell short of providing any meaningful sense of support.

More comprehensive support packages were offered to three parents. Mother and baby placements were offered both as a means of providing parents with access to support as required but also formed part of safeguarding measures and assessments into parenting capacity:

Leanne: I went into a mother and baby placement. I didn't like it, it was like living in the Big Brother house ... they were over you 24/7. If I went anywhere in the house with the baby I had to take the baby monitor with me. The foster carer had to have the other one.

Emma: If you wanted to take your child upstairs, if you wanted to bath your child, you had to be watched ... like you are some sort of paedophile. Am I a criminal now that I've had a baby?

The dual purpose of the placements made them problematic for some parents; Emma and Leanne's comments suggest that emphasis was placed on monitoring and assessment as opposed to encouragement and support.

- ***After parenting: the impact of parenting 'success' or 'failure'***

A key theme emergent from the interviews was the enduring impact that parenting had had on participants' lives. Only two of the eight parents continued to care for their children but both spoke with pride about their families and there was a discernible sense of achievement in having successfully created a positive family environment:

Amy: I look at them [children] as being my life fixers really because they've done such a big thing for me, the best thing I can give them is a good life now. ... I don't see myself as being that person any more, I feel like a new person now.

Bethan: *Yeah I went on to have my own children now who are nearly 15 and nearly 14. So yeah and they know about me being in care. ... What I certainly advocate is the fact that there's always scope and there's always possibility and it's important to have those aspirations for the future. Being in care isn't a pre-determinant of you know, having a really crap life, or not being able to achieve, or not having a family of your own.*

In contrast to the positive reflections of Bethan and Amy, the remaining six parents had experienced the removal of one or more children from their care. For these parents, parenthood had an equally powerful, but negative impact on their lives. During the interviews a mixture of emotions were apparent; parents described overwhelming feelings of sadness and loss for their child/ren, intense anger towards individual people or circumstances, as well as feelings of personal regret and self-blame. Only one of the six parents, articulated some degree of acceptance or agreement that their child was no longer with them:

Tara: *I obviously miss her, I miss her every day but I wouldn't turn back. ... I don't feel guilty for her being adopted, I think it was the best thing for her.*

For the remaining parents, the trauma of being separated from their child was coupled with an enduring sense of injustice. Participants often felt victimised as a result of past abuse and neglect, inadequately responded to and cared for by the State as children, and later unsupported, unfairly treated or punished as parents:

Sadie: *Even most of the judges who dealt with my kids' cases have said to social services, 'it is your fault she is the way she is, if you brought her up correctly she would know how to sustain a lifestyle to enable her to look after her children'.*

Sarah: *They [social services] made out I was scum. They tried to say I didn't love her. I didn't want her to be adopted. I didn't want her to go into foster care. All I wanted was some help and support.*

Emma: *The way they [social services] wrote it up was that I gave her up, that I didn't want her. But I did want her. I still do want her.*

Leanne: *It feels horrible because I know there's things I could've done differently. But I was a child myself, I needed help and support and I wasn't getting it.*

James: *I felt so much guilt, so much shame in the fact that I let her [partner] down, let myself down, worst of all I felt like I let [son's name] down and the fact that I failed as a parent and that's one thing I always said, I didn't want any of this to happen to him.*

Parents who had been separated from their children sometimes internalised messages of failure. As highlighted in James' comments, this included feelings of having failed in respect of

parenting and preventing inter-generational cycles of State care. The on-going impact of 'failed' parenting was expressed by Emma: *"It's like on Mother's Day, people say 'oh you're a mother' but no I'm not"*.

The emotional impact of losing a child was apparent for each of the six parents. However there was variation in how parents' reflected on the wider impact the experience had had upon their lives. For James and Sarah, it was important to protect themselves, and any further children, from a similar experience:

Sarah: I always vowed I wouldn't get pregnant again and I haven't... There are people that have gone on to have child after child and lost them all. I don't agree with that. That child has been put through the ringer ... you've seen that happen to that child. How could you put any more through that?

James: I wouldn't have another kid. I've already said I don't want any more kids. I wouldn't be able to go through that process again. I wouldn't put myself in that position.

Some parents were motivated to prove that the decision to remove a child was wrong; that social workers were wrong in their assessment and / or they were able to be 'good' parents. Although Sarah was resigned to having no further children, she discussed maintaining a lifestyle that she was proud of, stating: *"They [social services] won't break me down"*. For Leanne, her refusal *"to let myself go onto drink and drugs"* related to a continuing wish to be a 'successful' mother. Discussing her hopes for her second pregnancy she added *"I'll be making sure that doesn't happen again."*

In contrast, other parents felt the loss of a child had initiated further difficulties within their lives:

Emma: The day they took they baby off me, I collapsed on the floor. I cried and I cried and I cried. It's made me have mental health problems. It's affected the rest of my life.

James: I did turn to drink, I did start doing drugs, I won't deny that, I'm not proud of it but when you've experienced something like that you just turn to anything that kind of helps to forget those kind of memories. ... I'm not the person who I used to be, you know I suffer with depression a lot now. I've attempted suicide ... the entire process has had a massive impact on my life and it probably will now for the rest of it.

Tara: Like I went downhill, I hit alcohol, drugs. I like drove my car with no license, I went totally mad, I had no support off no one.

As well as deteriorations in mental health and increased destructive behaviour, some parents experienced the withdrawal of housing and financial support, while others reported returning

to unhealthy relationships as a means of comfort or support. For example, Sadie had attempted to end her violent relationship but stated:

They were going to take [child's name] anyway and [partner's name] was at the hospital, he was there when I was breaking my heart, he was the one hugging me when they took him so I fell back for him. And then three months later, I was pregnant again.

The decline in parents' well-being, behaviours and circumstances had the potential to heighten or confirm social workers' concerns about parenting capacity. In the event of subsequent pregnancies, such as Sadie's, parents were almost certain to experience repeated State intervention.

Discussion

This scoping study has provided insight into the experiences of looked after children and care leaver parents in Wales. Six of the eight parents interviewed had experienced the permanent removal of at least one child. Twelve of the sixteen children discussed in the interviews were 'looked after' or adopted. At times, the parents' stories were difficult to listen to and the enduring pain of losing children, almost palpable. Their reflections suggest that increased attention is paid to the support needs of looked after children and care leavers before, during and after they become parents. Prior to parenthood, parents in this study and elsewhere wanted to be 'good' parents and sought to secure better childhoods for their children than that which they had experienced (Corylon and Maguire 1999). However such aspirations risked being impeded by the legacy of difficult childhood experiences. In this study, the unresolved personal needs of parents was reflected in the repeated reports of depression, self-harm, suicide attempts and drug and alcohol dependency. This is corroborated by findings highlighting the poorer mental and physical health of looked after children in comparison to their non-looked after peers (Meltzer 2004). Likewise, experiencing a sense of belonging, stability and love have previously been recognised as important (Dickson, Sutcliffe and Gough 2009) but too often absent, features of looked after children's lives. As suggested by the findings of this study, abusive, neglectful and / or unstable experiences of care during childhood can impact on how confident, able and knowledgeable looked after children and care leavers feel in respect of parenting their own children.

During parenting, the findings of this study suggest attention is needed in respect of how support needs are assessed, how support is delivered and what support is available. Professional practice was commonly perceived to be judgmental and unsupportive for parents in this study,

a finding also identified in other research (Haight et al. 2009, Rutman et al. 2002). In order to access support, Rutman et al. (2002) argued that parents with a history of State care needed to navigate a delicate balance between positioning themselves as deserving and in need, without raising concerns of inadequate parenting. In this study, the findings suggest such a balance was not achieved. A recurrent complaint of parents was that they had expected social workers to offer support, but the type of support they had hoped for was not forthcoming or not available. Rather, social work intervention was often perceived as unhelpful and punitive. This can be related to recent critiques of social work practice which are adept at highlighting parenting inadequacies but fail to provide the necessary supports to help families overcome difficulties (Featherstone, Morris and White 2014). Somewhat in contrast to the experiences of parents in this study, Stockman and Budd's (1997) survey of professionals in North America found that informal modelling and feedback, peer support groups, home visitation and mentoring were considered the most effective parenting interventions for parents with a history of State care. Although more robust evidence is needed in respect of effective interventions designed to support parents with a history of State care (Mullins Geiger and Schelbe 2014) there was a considerable divergence in this study between parents' hopes in terms of parenting support and that which they experienced. Related to this, the potential role and obligations of the State as grandparent, as well as parent, has received some attention (Dominelli et al 2005, Centre for Social Justice 2015) but remains an underdeveloped concept.

Finally, the findings of this study suggest that after parenting, 'success' or 'failure' has a powerful and enduring influence over the lives of looked after children and care leavers. When successful, for parents in this study and others, parenthood has the potential to be transformative, offering repair and recovery from past events (Maxwell, Proctor and Hammond 2011, Barn and Mantovani 2007). In contrast, scant research attention has been paid to the experiences of looked after children and care leavers who have been unable to sustain care of their children. This study has highlighted the emotional pain experienced by such parents and considered the ensuing impact of the loss on their lives. Some parents had resigned themselves to having no further children, while others continued to hope for a family in the future. Although no parents reported achieving such an aim within this study, others had experienced cycles of repeated pregnancies and compulsory removals. Karen Broadhurst's recent research on women subject to repeat care proceedings, has raised concern about the seemingly high numbers with a history of State care (Broadhurst and Mason 2013). With this in mind, Broadhurst et al's (2015) assertion that at least 24% of women who have a child removed will

return as repeat clients in future care proceedings, confirms the importance of further attention on this under-research area.

In conclusion, despite its small-scale nature, the findings of this scoping study are thought provoking and likely to be of interest and relevance in a range of policy and practice settings. The remaining elements of this on-going fellowship project (see figure 1), particularly in respect of establishing current numbers of looked after children and care leavers who are parents in Wales, the range of family support services available to them, together with details of the child's legal status and living arrangements, will provide the necessary foundation from which to assess social need and practice within Wales.

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